

**HOME AND COMMUNITY BASED CARE WAIVERS:  
MENTAL RETARDATION (MR) WAIVER**

**DESCRIPTION**

The Mental Retardation Waiver serves individuals who, without Mental Retardation Waiver Services, would otherwise require placement in an ICF/MR Facility. DMAS staff conduct quality management reviews for recipients and services. Pre-admission assessments are completed by the Community Services Boards and authorization provided given by DMHMRSAS.

Providers are individuals, agencies or organizations that meet provider qualification requirements and obtain a provider agreement with DMAS to provide services. Providers bill DMAS using procedure codes to indicate the services rendered. Providers may be Community Service Boards (CSB) or private providers not affiliated with Community Service Boards.

**WAIVER INFORMATION<sup>1</sup>**

Service	Covered Services	Excluded Services	Pre-Screening and Authorization	Billing	Current Rates	
					NOVA	ROS
<b>Skilled Nursing</b>	Services of licensed nurses- RN and LPN- provided for individuals with serious medical conditions and complex health care needs that require specific skilled nursing services that cannot be provided by non-nursing personnel. May be provided in the home, or other community setting on a regularly scheduled or intermittent need basis. To include consultation and training for other providers of services.	Medical care needs that can be accessed under the State Plan for Medical Assistance. May not be provided by the parents of the individuals who are minors, the individuals spouse or individuals foster care provider.	Must be in the MR Waiver in order to access services. Authorization is provided by the prior authorization consultants at DMHMRSAS. Medical care needs must require specific skilled nursing services ordered by a Physician.	Reimbursement is made for the number of hours the recipient received skilled nursing services.	<u>RN</u> : \$31.50/hour <u>LPN</u> : \$27.30/hour	<u>RN</u> : \$25.94/hour <u>LPN</u> : \$22.52/hour
<b>Personal Care</b>	Services of personal care aides who assist with the recipient's activities of daily living such as bathing, dressing, transferring, ambulating and meal preparation. Can be agency-directed or consumer-directed.	<ul style="list-style-type: none"> <li>• Transportation services.</li> <li>• Skilled services requiring professional skills or invasive therapies.</li> <li>• Services provided to other members of the household</li> </ul>	Must be in the MR Waiver in order to access services. Authorization is provided by the prior authorization consultants at DMHMRSAS.	Reimbursement is made for the number of hours that the personal care aide rendered for the recipient.	<u>Agency-directed</u> : \$14.33/hour <u>Consumer-directed</u> : \$10.82/hour	<u>Agency-directed</u> : \$12.17/hour <u>Consumer-directed</u> : \$8.35/hour
<b>Respite Care</b>	Reimbursement for personal care aides or LPNS' who perform respite care and skilled respite care and other activities.. Differs from Personal Care in that the goal is for the relief of the caregiver. Services are limited to 720 hours per calendar year. Can be agency directed, consumer directed and or a combination of each.	<ul style="list-style-type: none"> <li>• Transportation services.</li> <li>• Skilled services requiring professional skills or invasive therapies.</li> <li>• Services provided to other members of the household</li> </ul> Recipient must live in the same household as the individual.	Must be in the MR Waiver in order to access services. Authorization is provided by the prior authorization consultants at DMHMRSAS.	Reimbursement is made for the number of hours the recipient received respite care.	<u>Agency-directed</u> : \$14.33/hour <u>Consumer-directed</u> : \$10.82/hour	<u>Agency-directed</u> : \$12.17/hour <u>Consumer-directed</u> : \$8.35/hour
<b>Companion Care</b>	Provision of non medical care, socialization or support to an adult(18YO or older). Assistance with meals preparation, community access and activities, laundry, shopping and light housekeeping.	Limit of 8 hours per 24 hour day. Skilled services requiring professional skills or invasive therapies. Services provided to other members in the same household.	Must be in the MR Waiver in order to access services. Authorization is provided by the prior authorization consultants at the DMHMRSAS.	Reimbursement is made for the number of hours the recipient received companion care.	<u>Agency-directed</u> : \$14.33/hour <u>Consumer-directed</u> : \$10.82/hour	<u>Agency-directed</u> : \$12.17/hour <u>Consumer-directed</u> : \$8.35/hour
<b>Personal Emergency Response System (PERS)</b>	An electronic device that enables certain recipients at high risk of institutionalization to secure help in an emergency through the provision of a two-way voice communication system that dials a 24-hour response or monitoring center upon activation and via the recipient's home telephone line.	Limited to those who are alone for significant periods of the day.	Must be in the MR Waiver in order to access services. Authorization is provided by the prior authorization consultants at DMHMRSAS.	Reimbursements for a one-time installation and a monthly monitoring fee.	<u>Installation</u> : \$59.00 <u>Monthly Monitoring</u> : \$34.50	<u>Installation</u> : \$50.00 <u>Monthly Monitoring</u> : \$30.00
<b>PERS Medication Monitoring</b>	An electronic device that enables certain recipients at high risk of institutionalization to be reminded to take their medications at the correct dosages and times.	Limited to those who are alone for significant periods of the day.	Must be in the MR Waiver in order to access services. Authorization is provided by the prior authorization consultants at DMHMRSAS.	Reimbursements for a one-time installation, a monthly monitoring fee, and a nurse to fill the unit with medication.	<u>Installation</u> : \$88.50 <u>Monthly Monitoring</u> : \$59.00 <u>RN Services</u> : \$15.00/unit <u>LPN Services</u> : \$13.00/unit	<u>Installation</u> : \$75.00 <u>Monthly Monitoring</u> : \$50.00 <u>RN Services</u> : \$12.25/unit <u>LPN Services</u> : \$10.25/unit

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<b>WAIVER INFORMATION, CONTINUED</b>					
<b>Consumer-Directed Services Facilitation</b>	Responsible for monitoring the ongoing provision of all Consumer Directed services.	Individuals under the age of 18 and those unable to independently manage their own services must have a family member/caregiver serve as employer.	Must be in the MR Waiver in order to access services. Authorization is provided by the prior authorization consultants at DMHMRSAS.	Services Facilitation is billed using procedure codes to indicate the type of service provided.	<u>Comprehensive Visit:</u> \$219.45                      \$169.05 <u>Routine Visit:</u> \$68.25                      \$52.50 <u>Reassessment Visit:</u> \$110.25                      \$84.00 <u>Consumer Training:</u> \$218.40                      \$168.00 <u>Management Training:</u> \$27.30                      \$21.00
<b>Crisis Stabilization</b>	Direct intervention to strengthen the current living situation and assist individuals to remain living in the community. Services may include neuro- psychiatric, psychiatric, psychological, and other functional assessments and stabilization techniques.	May only occur after an initial face to face assessment by a qualified MR professional. Extensions beyond the allowable 15 days must be prior authorized and only following a documented face to face reassessment by a qualified MR professional.	Must be in the MR Waiver to access service. Must have a face to face assessment prior to services. Preauthorization required and performed by the DMHMRSAS.	Billing is for one hour in 15 day increments but not to exceed 60 days in a calendar year.	<u>Intervention:</u> \$89.30/hr.
<b>Crisis Supervision</b>	Crisis Supervision may be provided as a component of Crisis Stabilization services only if clinical or behavioral interventions allowed under this service are also provided during the authorized period. Crisis Supervision must be provided one-to-one and face-to-face with the individual. It may be provided by the same provider of Crisis Stabilization Clinical or Behavioral services or a different provider.	Not for continuous long term care. Room and board are not a component of this service.	Must be in the MR Waiver to access service. Must have a face to face assessment prior to services. Preauthorization required and performed by the DMHMRSAS.	Billing is hourly service units.	<u>Supervision:</u> \$24.26
<b>Supported Employment</b>	Supported Employment means work in settings in which persons without disabilities are typically employed. It is especially designed for individuals with developmental disabilities facing severe impediments to employment due to the nature and complexity of their disabilities, irrespective of age or vocational potential. This service may be authorized as individual placement, or enclave.	Service in combination with prevocational and day support services is limited to 780 units per plan year. Individual placement is limited to 40 hours per week.	Must be in the MR Waiver in order to access services. Authorization is provided by the prior authorization consultants at the DMHMRSAS.	Billing is for the number of hours for services rendered.	<u>Individual Placement:</u> \$17.64/hr. <u>Enclave/Work Crew:</u> \$35.84/unit
<b>Pre-Vocational Services</b>	Services to prepare and individual for unpaid/ paid employment, but are not job task oriented. Provided for individuals who are not expected to join the general work force without support or participation in the transitional/ sheltered workshop program within a year of beginning of waiver services. May be center or non center based care.	Service in combination with Supported Employment and Day Support services is limited to 780 units per plan year.	Must be in the MR Waiver in order to access services. Authorization is provided by the prior authorization consultants at the DMHMRSAS.	Billing is for the number of units for services rendered.	<u>Regular Intensity:</u> \$26.40/unit <u>High Intensity:</u> \$37.65/unit

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**WAIVER INFORMATION, CONTINUED**

<b>Therapeutic Consultation</b>	Therapeutic Consultation provides expertise, training, and technical assistance in specific specialty areas to assist family members, caregivers, and other service providers in supporting the individual.	Can not be billed solely for the purpose of monitoring.	Must be in the MR Waiver in order to access services. Authorization is provided by the prior authorization consultants at the DMHMRSAS.	Billing is per hours for services rendered.	\$55.13
<b>In-Home Residential Support</b>	Residential support services -training and assistance or specialized supervision provided primarily in the individual's home or a DMHMRSAS licensed home or approved residence considered to be his home, to enable the individual to maintain health, developed skills in activities or daily living and safety in the use of community resources and adapting their behavior to community and home environments.	Can't be used to provide respite for family members.	Must be in the MR Waiver in order to access services. Authorization is provided by the prior authorization consultants at the DMHMRSAS.	Billing is per hours for services rendered.	<u>Individual:</u> \$19.85/hr. <u>Congregate:</u> \$14.80/hr.
<b>Day Support</b>	Day Support services include training, assistance or specialized supervision for the acquisition, retention or improvement in self-help, socialization and adaptive skills. It allows peer interactions and an opportunity for community and social integration. Specialized supervision provides staff presence for ongoing or intermittent intervention to ensure an individual's health and safety. This service may be authorized at regular intensity or high intensity, either center based or non-center based.	Can not be performed in an individuals home or residential setting without written approval. Transportation can not exceed 25% of the total hours billed per day.	Must be in the MR Waiver in order to access services. Authorization is provided by the prior authorization consultants at the DMHMRSAS.	Billing is per unit for services rendered.	<u>Regular Intensity, Center-Based:</u> \$26.45/unit <u>Regular Intensity, Non-Center-Based:</u> \$25.45/unit  <u>High Intensity, Center-Based:</u> \$37.65/unit <u>High Intensity, Non-Center-Based:</u> \$37.65/unit
<b>Environmental Modifications</b>	Reimbursement for physical adaptations to a house, or place of residence, vehicle used by the individual and the work place when it provides for direct medical or remedial benefit.	Only pertains to the physical structure of the residence. Must receive one other waiver service in addition to Case Management. Maximum limit of \$5000.00 per plan year. Cannot be carried over from plan to plan.	Must be in the MR Waiver in order to access services. Authorization is provided by the prior authorization consultants at the DMHMRSAS.	Billing is for one unit and for the preauthorized determination	Limited to \$5,000 per CSP year per individual.
<b>Assistive Technology</b>	Assistive Technology is specialized medical equipment, and supplies, devices, controls, and appliances, not available under the State Plan for Medical Assistance, which enable individuals to increase their abilities to perform activities of daily living, or to perceive, control, or communicate with the environment in which they live, or which are necessary to their proper functioning. Assistive technology devices are expected to be portable.	Must receive one other waiver service and may be provided in a residential or non residential setting. Maximum limitation is \$5000.00 per plan year and can not be carried over from plan to plan year. Can't be used for the convenience of the caregiver or as a restraint.	Must be in the MR Waiver in order to access services. Authorization is provided by the prior authorization consultants at the DMHMRSAS.	Billing is for one unit and for the preauthorized determination	Limited to \$5,000 per CSP year per individual.

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HOME AND COMMUNITY BASED CARE WAIVERS:  
MENTAL RETARDATION (MR) WAIVER (Continued)

RECIPIENT AND PAYMENT DATA<sup>2</sup>

	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006
<b>Skilled Nursing</b>										
Number of Recipients	18	17	23	33	46	56	61	65	77	103
Payments	\$546,183	\$554,117	\$604,289	\$898,243	\$1,287,707	\$1,468,231	\$1,992,153	\$1,859,943	\$2,506,712	\$3,030,860
Cost per Recipient	\$30,344	\$32,595	\$26,273	\$27,219	\$27,994	\$26,218	\$32,658	\$28,615	\$32,555	\$29,426
<b>Agency-Directed Personal Care</b>										
Number of Recipients	75	99	93	148	138	135	335	328	374	375
Payments	\$787,585	\$1,197,570	\$1,585,636	\$2,176,033	\$2,516,047	\$2,562,892	\$5,213,397	\$4,800,678	\$6,086,549	\$6,827,061
Cost per Recipient	\$10,501	\$12,097	\$17,050	\$14,703	\$18,232	\$18,984	\$15,562	\$14,636	\$16,274	\$18,205
<b>Consumer-Directed Personal Care</b>										
Number of Recipients							170	290	426	549
Payments							\$1,641,493	\$3,130,857	\$5,513,046	\$8,729,850
Cost per Recipient							\$9,656	\$10,796	\$12,941	\$15,901
<b>Agency-Directed Respite Care</b>										
Number of Recipients	126	139	166	315	402	494	505	480	527	519
Payments	\$257,990	\$309,732	\$391,948	\$711,088	\$1,090,919	\$1,470,658	\$1,633,482	\$1,533,353	\$1,690,212	\$2,032,224
Cost per Recipient	\$2,048	\$2,228	\$2,361	\$2,257	\$2,714	\$2,977	\$3,235	\$3,194	\$3,207	\$3,916
<b>Consumer-Directed Respite Care</b>										
Number of Recipients							205	470	580	673
Payments							\$619,192	\$1,308,643	\$2,042,186	\$2,764,732
Cost per Recipient							\$3,020	\$2,784	\$3,521	\$4,108
<b>Agency-Directed Companion Care</b>										
Number of Recipients							34	10	28	18
Payments							\$9,651	\$40,627	\$131,377	\$65,545
Cost per Recipient							\$284	\$4,063	\$4,692	\$3,641
<b>Consumer-Directed Companion Care</b>										
Number of Recipients							34	75	104	157
Payments							\$180,408	\$367,581	\$769,263	\$1,243,346
Cost per Recipient							\$5,306	\$4,901	\$7,397	\$7,919
<b>PERS</b>										
Number of Recipients							5	8	16	19
Payments							\$465	\$2,030	\$4,290	\$4,862
Cost per Recipient							\$93	\$254	\$268	\$256
<b>PERS Medication Monitoring<sup>3</sup></b>										
Number of Recipients							1	1	N/A	1
Payments							\$150	\$50	\$530	\$525
Cost per Recipient							\$150	\$50	N/A	N/A
<b>CD Services Facilitation</b>										
Number of Recipients							364	594	751	893
Payments							\$121,031	\$137,202	\$177,005	\$210,893
Cost per Recipient							\$333	\$231	\$236	\$236
<b>Crisis Stabilization</b>										
Number of Recipients						22	23	13	33	42
Payments						\$48,195	\$176,563	\$19,922	\$75,053	\$104,752
Cost per Recipient						\$2,191	\$7,677	\$1,532	\$2,274	\$2,494

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**HOME AND COMMUNITY BASED CARE WAIVERS:  
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**RECIPIENT AND PAYMENT DATA, CONTINUED**

	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006
<b>Crisis Supervision</b>										
Number of Recipients								22	25	25
Payments								\$56,082	\$147,460	\$95,933
Cost per Recipient								\$2,549	\$5,898	\$3,837
<b>Supported Employment</b>										
Number of Recipients	78	114	181	286	310	325	368	421	499	511
Payments	\$839,936	\$912,787	\$1,902,965	\$2,652,846	\$3,248,860	\$3,313,252	\$3,399,673	\$3,713,073	\$4,560,250	\$5,349,089
Cost per Recipient	\$10,768	\$8,007	\$10,514	\$9,276	\$10,480	\$10,195	\$9,238	\$8,820	\$9,139	\$10,468
<b>Pre-Vocational Services<sup>3</sup></b>										
Number of Recipients							2,421	512	N/A	606
Payments							\$2,296,263	\$9,178,123	\$7,244,268	\$6,242,931
Cost per Recipient							\$948	\$17,926	N/A	N/A
<b>Therapeutic Consultation</b>										
Number of Recipients	212	195	284	331	324	403	490	447	471	499
Payments	\$111,318	\$106,017	\$163,703	\$202,475	\$224,545	\$294,700	\$296,530	\$256,168	\$297,450	\$320,545
Cost per Recipient	\$525	\$544	\$576	\$612	\$693	\$731	\$605	\$573	\$632	\$642
<b>In-Home Residential Support</b>										
Number of Recipients							1,026	1,083	1,214	1,208
Payments							\$18,067,986	\$18,240,946	\$23,459,522	\$27,156,284
Cost per Recipient							\$17,610	\$16,843	\$19,324	\$22,480
<b>Congregate Residential Support</b>										
Number of Recipients	1,567	1,868	2,160	2,831	3,243	3,609	2,917	3,113	3,420	3,670
Payments	\$52,461,475	\$63,440,489	\$75,902,806	\$94,427,825	\$118,366,860	\$141,828,659	\$143,330,158	\$138,996,483	\$172,930,670	\$201,880,236
Cost per Recipient	\$33,479	\$33,962	\$35,140	\$33,355	\$36,499	\$39,299	\$49,136	\$44,650	\$50,565	\$55,008
<b>Day Support<sup>3</sup></b>										
Number of Recipients	1,041	2,393	2,850	3,489	3,662	3,876	4,300	3,918	N/A	4,357
Payments	\$12,344,883	\$20,365,244	\$32,815,177	\$37,982,695	\$42,806,209	\$46,545,401	\$45,408,544	\$43,222,184	\$51,979,975	\$58,581,787
Cost per Recipient	\$11,859	\$8,510	\$11,514	\$10,886	\$11,689	\$12,009	\$10,560	\$11,032	N/A	N/A
<b>Environmental Modifications</b>										
Number of Recipients	11	23	15	36	40	59	45	71	129	167
Payments	\$26,132	\$63,297	\$41,141	\$110,466	\$121,579	\$178,187	\$150,481	\$222,182	\$467,840	\$621,657
Cost per Recipient	\$2,376	\$2,752	\$2,743	\$3,069	\$3,039	\$3,020	\$3,344	\$3,129	\$3,627	\$3,722
<b>Assistive Technology</b>										
Number of Recipients	32	18	16	43	30	53	58	83	162	253
Payments	\$32,676	\$17,469	\$17,922	\$60,150	\$37,398	\$64,222	\$67,106	\$143,855	\$270,966	\$414,985
Cost per Recipient	\$1,021	\$971	\$1,120	\$1,399	\$1,247	\$1,212	\$1,157	\$1,733	\$1,673	\$1,640
<b>TOTAL SERVICES</b>										
Number of Unduplicated Recipients	1,768	3,172	3,640	4,698	5,056	5,367	5,496	5,622	6,421	6,599
Payments	\$67,408,178	\$86,966,722	\$113,425,587	\$139,221,821	\$169,700,124	\$197,774,397	\$224,604,726	\$227,173,900	\$280,354,624	\$325,678,097
Cost per Recipient	\$38,127	\$27,417	\$31,161	\$29,634	\$33,564	\$36,850	\$40,867	\$40,408	\$43,662	\$49,353

Notes:

- (1) MR Waiver Services Manual.
- (2) Recipient and expenditures data sources include the CMS 372 Report series "Annual Report on Home and Community-Based Waivers", the DMAS CD Payroll
- (3) Reliable unduplicated counts of recipients for this service are not available for FY 2005..

File: MR-WVR-06.xls  
Date: Dec-06  
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